CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

414:99

The C/OH Instruction (Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages fi	led:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS MR FIRST Dorian NICKNAME LAST	MI M SUFFIX	OFFICE Date Received	USE ONLY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address 5 CANDIDATE / OFFICEHOLDER PHONE	ADDRESS / PO BOX; APT / SUITE #; CO SO		Date Hand-delivered	or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS/MRS) MR FIRST Claudia - Gabr NICKNAME LAST	nelle	Receipt # Date Processed Date Imaged	Amount \$
7 CAMPAIGN TREASURER ADDRESS (Residence or Business) 8 CAMPAIGN TREASURER PHONE	STREET ADDRESS (NO PO BOX PLEASE); APT / SL 504 Clover Fl Cedar Park, T AREA CODE PHONE NUMBER (818) 314- 4253	at Road	ZIP CODE	
9 REPORT TYPE	July 15 30th day before elected		treasurer ap (Officeholde	
10 PERIOD COVERED	Month Day Year	THROUGH 4	Day Year / 25 / 20	18
11 ELECTION	Month Day Year Primary 5 / 5 / 2018 General	Runoff Other Description Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Cedar Po Council,	uk Ci	ty Le
	GO ТО І	PAGE 2		

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME	M Ch	3VEZ	15 Filer ID (Ethics Commission Filers)		
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.				
	COMMITTEE TYPE	Citizens for Cedar	Park PAC		
	SPECIFIC	PO BOX 308, 100 E. W	nitestone Ste 148		
		Cedar Park, TX. 786			
Additional Pages		Candace Lambert Committee campaign treasurer name Committee campaign treasurer address P.O. Box 308, 100 E. Who	itestone Ste 148		
		Cedar Park, TX. 7861			
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAT S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZ			
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,881.01		
EXPENDITURE TOTALS	3. TOTAL F	\$			
	4. TOTAL	POLITICAL EXPENDITURES	\$ 595.82		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 500.00		
18 AFFIDAVIT					
LEANN M. QUINN My Notary ID # 11692430 Expires July 30, 2019 I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.					
		Signature of Cano	didate or Officeholder		
AFFIX NOTARY STAMP / SEALABOVE					
Sworn to and subscr	ibed before me, b	y the said Doctor Chave ?	, this the		
day of, 20, to certify which, witness my hand and seal of office.					
Helm 7	Delam M. C. LeADOM. QUID City Sec				
Signature of officer ac	dministering oath	Printed name of officer administering oath	Title of officer administering oath		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME 20 Filer ID (Ethics C	Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,125.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,756.01
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE E: LOANS	\$ 500.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 595.82
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. 10+ 2 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 7 Amount of contribution (\$) 4-17 Mark E. Bofferding 2018 6 Contributor address; addle Blanket \$ 25.00 Leander, TX. 78641 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:_ Date Amount of contribution (\$) Steven Wayne Contributor address; City; State: Zip Code 12420 Everglade Street Los Angelos, CA. 90066 \$ 350.00 Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor ut-of-state PAC (ID#:_ Date Amount of contribution (\$) Mauricio Iragorri Contributor address: City State; Zip Code 12551 Kenny Drive # 200.00 Granada Hills, CA. 913448 Employer (See Instructions) Principal occupation / Job title (See Instructions) Full name of contributor Date Amount of contribution (\$) ut-of-state PAC (ID#:_ 4-15 00.00 th 2018

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Dorio	n M Chavez	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	7 Amount of contribution (\$)
4-22	William Wilson 6 Contributor address; City; State; Zip Code 1407 Etheridge Ave	# 500.00
2016	Austin TX. 78703	
8 Principal occu	pation / Job title (See Instructions) 9 Employer (See	Instructions)
Date	Full name of contributor	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occup	pation / Job title (See Instructions) Employer (See	Instructions)
Date	Full name of contributor	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occup	pation / Job title (See Instructions) Employer (See	Instructions)
Date	Full name of contributor) Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occup	eation / Job title (See Instructions) Employer (See	Instructions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Candidate/Officeholder/Political Committee Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2_FILER NAME Vorian 4 Date 5 Payee name Super Cheap Signs
7 Payee address; City; State; Zip Code Cer
9200 Waterford Cer 4-12-2018 6 Amount (\$) 7 Payee address; Centre Blvd Suite 100 487.99 Austin, TX. (a) Category (See Categories listed at the top of this schedule) (b) Description 8 __ Check if travel outside of Texas. Complete Schedule T. **PURPOSE** <u>Campaign</u> OF Check if Austin, TX, officeholder living expense **EXPENDITURE** Signs Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name 4-14-2018 E. Whitestone Blvd 36.75 Cedar Park, TX. 78613 Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Campaign **PURPOSE** Check if Austin, TX, officeholder living expense Breakfast **EXPENDITURE** Blockwalkers Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH 4-15-2018 aghis Pizzeria City; State; Zip Code Payee address; Amount (\$) 920 N. Vista Ridge Blvd. 71.08 Cedar Park, TX. 78613 Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. **PURPOSE** OF Check if Austin, TX, officeholder living expense EXPENDITURE Blockwal Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A2

T	he Instruction Guide explains how to complete this form	n.	1 Total pages Schedule A2:
2 FILER NAME Dorian M. Chavez		3 Filer ID (Ethics Commission Filers)	
	F UNITEMIZED IN-KIND POLITICAL CONTRIB	BUTIONS	\$ 348.67
5 Date 3-27	3-27 Tony Dale		8 Amount of 9 In-kind contribution description . Campaign
2018	7 Contributor address; City; State; Zip Coo 2800 E. Whitestone Blvd & Cedar Park, TX. 78613	5uute 12	Check if travel outside of Texas. Complete Schedule T.
10 Principal occ	supation / Job title (FOR NON-JUDICIAL) (See Instructions) J Business Owner		er (FOR NON-JUDICIAL) (See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor)	Amount of In-kind contribution Contribution \$. description
	Contributor address; City; State; Zip Cod	de	: : : : : : : : : : : : : : : : : : :
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	itor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	ATTACH ADDITIONAL COPIES OF T		
lf	contributor is out-of-state PAC, please see instruction	guide for a	aditional reporting requirements.

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Revised 9/8/2015

SCHEDULE A2

Т	The Instruction Guide explains how to complete this form	m.	1 Total pages Schedule A2:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Dori	an M. Chavez		
4 TOTAL C	OF UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 121.40
5 Date	6 Full name of contributor		8 Amount of 9 In-kind contribution Contribution \$ description
3-29	Tony Dale		Campaign 1
2018	7 Contributor address; City, State; Zip Coo	a. Sui	te 120 PMB 20x Expense
	Cedar Park, TX 78613		Check if travel outside of Texas. Complete Schedule T.
	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
<u>Small</u>		Span	cil Hill Consulting LLC
12 Contributor's	s principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	s employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	or is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	
Date	Full name of contributor		Amount of . In-kind contribution
	Sometimes of contribution of c		Contribution \$. description
	Contributor address; City; State; Zip Cod	 da	
	Only, State, Zip Col.	ue	<u> </u>
Deinalani			Check if travel outside of Texas. Complete Schedule T.
Finicipal occ	cupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	s principal occupation (FOR JUDICIAL)	Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
Contributor's	s employer/law firm (FOR JUDICIAL)	Law firm	of contributor's spouse (if any) (FOR JUDICIAL)
If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ii commodioi	ris a child, law lirm of parent(s) (if any) (FOR JUDICIAL)		

SCHEDULE A2

The Instruction Guide explains how to complete this form			1 Total pages Schedule A2: 3 of 5
2 FILER NAME Dorian M Chavez			3 Filer ID (Ethics Commission Filers)
	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 920.00
5 Date Д-ЭЭ Э018	-22 Citizens for Cedar Park Pl		8 Amount of 9 In-kind contribution Contribution \$ description Campaign M Printed matrer and advertizin Check if travel outside of Texas. Complete Schedule T.
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor)	Amount of . In-kind contribution Contribution \$. description
	Contributor address; City; State; Zip Cod	 de	
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

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SCHEDULE A2

The Instruction Guide explains how to complete this form.		n.	1 Total pages Schedule A2: くっちち
2 FILER NAME Dorian M Chavez			3 Filer ID (Ethics Commission Filers)
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 115.94
5 Date 4-2 2018	4-2 Jon Jewitt		8 Amount of 9 In-kind contribution description. Campaign Material and
	Cedar Park, 7X. 78613		Check if travel outside of Texas. Complete Schedule T.
<u>Ket</u>	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor)	Amount of . In-kind contribution Contribution \$. description
	Contributor address; City; State; Zip Contributor		
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	er (FOR NON-JUDICIAL)(See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	itor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	*	
		5005000-1	
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SCHEDULE A2

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2: 5 of 5
2 FILER NAM	E		3 Filer ID (Ethics Commission Filers)
Dorio	in M. Chavez		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRII	BUTIONS	\$ 250.00
5 Date 4-26 2018	1-26 Timothy Kelly		8 Amount of 9 In-kind contribution Contribution \$ description Campaign V Facebook Advertising Check if travel outside of Texas. Complete Schedule T.
1 ∕	supation / Job title (FOR NON-JUDICIAL) (See Instructions)	11 Employe	er (FOR NON-JUDICIAL)(See Instructions)
	ny - Keticed principal occupation (FOR JUDICIAL)	13 Contribu	ttor's job title (FOR JUDICIAL) (See Instructions)
	· · · · · · · · · · · · · · · · · · ·	10 0011,1100	not o job due (i ott doblotal) (dee instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor		Amount of . In-kind contribution Contribution \$. description
	Contributor address; City; State; Zip Cod	die	
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	Check if travel outside of Texas. Complete Schedule T. r (FOR NON-JUDICIAL) (See Instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	tor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	**************************************	

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